orm Approved	CD
MB No. 0960-0466	SP

Request for Earnings and Benefit Esti	mate Statement		
Please check this box if you want to get your statement in Spanish instead of English.	For items 7 and 9 show only earnings covered by Social Security. Do NOT include wages from State, local or Federal Government employment that are NOT covered for Social Security or that are Covered ONLY by Medicare.	10. Address where you want us to send the statement.	
Please print or type your answers. When you have completed the form, fold it and mail it to us.	Show your actual earnings (wages and/or net self-employment income) for last year and your estimated earnings for this year.	Street Address (Include Apt. No., P.O. Box, or Rural Route)	
1. Name shown on your Social Security card:	A. Last year's actual earnings: (Dollars Only)		
First Name Middle Initial	\$ \ , \ . 0	City State Zip Code	
2. Your Social Security number as shown on your card: 3. Your date of birth Month Day Year 4. Other Social Security numbers you have used:	 B. This year's estimated earnings: (Dollars Only) \$	Notice: I am asking for information about my own Social Security record or the record of a person I am authorized to represent. I understand that when requesting information on a deceased person, I must include proof of death and relationship or appointment. I further understand that if I deliberately request information under false pretenses I may be guilty of a federal crime and could be fined and/or imprisoned. I authorize you to use a contractor to send the statement of earnings and benefit estimates to the person named in item 10. Please sign your name (Do not print)	
5. Your sex: Male Female 6. Other names you have used	enter the amount that most closely reflects your future average yearly earnings. If you don't expect any significant changes, show the same amount you are earning now (the amount in 7B).	Signature	
(including a maiden name):	Future average yearly earnings: (Dollars Only)	Date (Area Code) Daytime Telephone No	
	\$, . 0 0		

SOCIAL SECURITY ADMINISTRATION

About The Privacy Act

Social Security is allowed to collect the facts on this form under Section 205 of the Social Security Act. We need them to quickly identify your record and prepare the earnings statement you asked us for. Giving us these facts is voluntary. However, without them we may not be able to give you an earnings and benefit estimate statement. Neither the Social Security Administration nor its contractor will use the information for any other purpose.

Time It Takes To Complete This Form

We estimate that it will take you about 5 minutes to complete this form. This includes the time it will take to read the instructions, gather the necessary facts and fill out the form. If you have comments or suggestions on this estimate, write to the Social Security Administration, ATTN: Reports Clearance Officer, 1-A-21 Operations Bldg., Baltimore, MD 21235-0001. Send only comments relating to our estimate or other aspects of this form to the office listed above. All requests for Social Security cards and other claims-related information should be sent to your local Social Security office, whose address is listed under Social Security Administration in the U.S. Government section of your telephone directory.

Mailing Instructions

Print form on 8 1/2 x 11 inch paper, complete and sign form, fold in thirds and insert in a standard size number 10 business envelope (4 1/8 x 9 1/2 inch).

Mail to the following address:

Social Security Administration PO Box 3600 Wilkes-Barre, PA 18767-3600.

Future Revised Editions

SSA forms are subject to perodic revisions. You can be assured that the SSA Internet Server will always have the latest edition of this form. Please check to make certain that you have the latest edition.

Request for Earnings and Benefit Estimate Statement

The Social Security program belongs to you and you can count on it to be there for you. Social Security can protect you in many ways. It can help support your family in the event of your death and provide monthly payments and health insurance when you retire or if you become disabled.

To help you learn how Social Security is a part of your life, we are pleased to offer you a free Personal Earnings and Benefit Estimate Statement.

The Personal Earnings and Benefit Estimate Statement shows your Social Security earnings history and estimates how much you have paid in Social Security taxes. It also estimates your future benefits and tells you how you can qualify for benefits. When you receive your earnings statement, we hope you will use it to start planning for a strong financial future.

To receive your statement, please fill out the form and mail it to us. You should receive your statement in 6 weeks or less. We look forward to sending it to you.

Thirty J. Chater

Shirley S. Chater Commissioner of Social Security